UNITED STATES PATENT APPLICATION COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor I hereby declare that: my residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or a joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: ELECTRICAL LEADS The specification of which is attached hereto was filed on under application serial no, which I have reviewed and for which I solicit a United States patent.							
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.							
I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).							
I hereby claim foreign priority benefits under Title 35, United States Code, §119/365 of any foreign application(s) for patent of inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on the basis of which priority is claimed:							
 ✓ no such applications have been filed. ☐ such applications have been filed as follows: 							
FOREIGN APPLICATION(S), IF ANY, CLAIMING PRIORITY UNDER 35 USC §119							
COUNTRY	APPLI	CATION NUMBER	DATE OF FILING		DATE OF ISSUE		
ALL FOR	REIGN APPL	ICATIONS, IF ANY, FILE	D BEFORE THE PRIOR	ITY APPLICA	ATION(S)		
COUNTRY	APPLI	CATION NUMBER DATE OF FI		VG	DATE OF ISSUE		
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insofar as the subject matter of each by the first paragraph of Title 35, U	h of the clair nited States	ns of this application is n Code, §112, I acknowledg	ot disclosed in the prior to ge the duty to disclose ma	United States aterial inform	onal application(s) listed below and, s application in the manner provided ation as defined in Title 37, Code of r PCT international filing date of this		
U.S. APPLICATION NUMBER		DATE OF FILING		STATUS (patented, pending, abandoned)			
					·		
I hereby appoint the following attor Office connected herewith:	ney(s) and/o	r agent(s) to prosecute t	nis application and to tra	nsact all bus	iness in the Patent and Trademark		
(a) A duty of candor a	and good faith		mark Office rests on the inver		ttomey or agent who prepares ecution of the application and		

or prosecutes the application and on every other individual who is substantially involved in the preparation or prosecution of the application and who is associated with the inventor, with the assignee or with anyone to whom there is an obligation to assign the application. All such individuals have a duty to disclose to the Office information they are aware of which is material to the patentability of the application. Such information is material where there is substantial likelihood that a reasonable examiner would consider it important in deciding whether to allow the application to issue as a patent. The duty is commensurate with the degree of involvement in the preparation or prosecution of the application.

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Thomas G. Berry	Reg. No. 31,736	Eric R. Waldkoetter	Reg. No. 36,713
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Kenneth J. Collier	Reg. No. 34,982	Thomas F. Woods	Reg. No. 36,726
Curtis D. Kinghom	Reg. No. 33,926		÷ .

Please direct all correspondence in this case to: Elisabeth L. Belden.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

_	Full Name of	FIRST NAME	MIDDLE INITIAL	LAST NAME
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2	Inventor	THOMAS	D	BROSTROM
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-				

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